24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
PACPLUS	
	C C00516500
Check If 24-hour report 48-hour report New report Amends report file	ed on Man / Dab / Yayayay
Full Name (Last, First, Middle Initial) of Payee Chambers Lopez Strategies	Date
Chambers Lopez Strategies	M M / D D / Y Y Y Y
Mailing Address P.O. Box 5539	05
1.0.257.5533	Amount
City State Zip Code	20720 00
Arlington VA 22205	28700.00
Purpose of Expenditure Catagory/ Of	Transaction ID : SE.4195 fice Sought: House State: AZ
Production cost and paid media ads Category/ Type OI OI OR OI OI OI OI OI OI OI	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
	neck One: Support X Oppose
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Calefidal Fear-10-Date Fer Election 29700 00 201	sbursement For: Primary General
for Office Sought	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
	M M / D D / Y Y Y Y
Mailing Address	- []
Mailing Address	Amount
Other To Out	Amount
City State Zip Code	
D (5 1)	fice Sought: House State:
Purpose of Expenditure Category/ Type	Consta
	President District:
Name of Federal Candidate Supported or Opposed by Expenditure:	neck One: Support Oppose
OI .	опеск опе.
Calendar Year-To-Date Per Election Dis	sbursement For: Primary General
for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	28700.00
(a) SOBTOTAL OF REHIZED INDEPENDENT EXPENDITURES	28700.00
(b) CURTOTAL of Unitersized Independent Expanditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
() 70741	
(c) TOTAL Independent Expenditures	28700.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
party community, any pointer party community of the agenti	
Lisa Le	M = M / D = D / Y = Y = Y
[Electronically Filed] Date	05 24 2012
Signature	